

COVER

SHEET

FAX

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**To:** Examiner Kishor Mayekar  
**Fax #:** 1-703-872-9643  
**From:** Sam Rosen, Esquire  
**Subject:** Amendment in Serial No. 10/023,184; Our Docket No. 21398-PA-DIV  
**Date:** December 1, 2003  
**Pages:** 6, including this cover sheet.

**OFFICIAL****COMMENTS:**

Transmitted herewith is the following:

- Supplemental Amendment
- Form PTO-1083.

Respectfully submitted,



Sam Rosen  
Reg. No. 37,991

**CERTIFICATE OF TRANSMITTAL**

I hereby certify that this correspondence, consisting of 6 pages, is being transmitted via facsimile to the U.S. Patent and Trademark Office, P. O. Box 1450, Alexandria, VA 22313-1450.

Date: December 1, 2003

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By: 

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To the Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the application of:

Inventor: Ralph F. Altman

Serial No.: 10/023,184

Filed: December 18, 2001

For: FLY ASH TREATMENT BY IN SITU OZONE GENERATION

☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ No additional fee is required.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD. FEE	OR	RATE	ADD. FEE
TOTAL	* 8	MINUS	** 20	=	x 9	\$		x 18	\$0
INDEP	* 4	MINUS	*** 4	=	x 43	\$		x 86	\$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$		+290	\$
					TOTAL	\$	OR	TOTAL	\$0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 02-2839 in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is enclosed.


☐ A check in the amount of \$ \_\_\_\_\_ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2839. A duplicate copy of this sheet is enclosed.

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Case Docket No. 21398-PA-DIV  
FORM PTO-1083

  
Sam Rosen  
Reg. No. 37,991

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Ralph F. Altman	*		
Serial No.	10/023,184	*		
Filed:	December 18, 2001	*	Art Unit:	1753
For:	FLY ASH TREATMENT BY IN SITU OZONE GENERATION	*	Examiner:	Kishor Mayekar
		*		

## SUPPLEMENTAL AMENDMENT

To the Honorable Commissioner  
of Patents and Trademarks  
Washington, DC 20231

Dear Sir:

In response a telephone interview with Examiner Mayekar on November 25, 2003, please  
amend the above-identified application as follows:

Amend the claims as appears on the following pages.